Sovah Health Martinsville

320 Hospital Drive
Martinsville, VA 24112
276-666-7237

7806761243

Emergency Department Instructions for: **Hill, Brian D**

Arrival Date: **Friday, September 21, 2018**

Thank you for choosing **Sovah Health Martinsville** for your care today. The examination and treatment you have received in the Emergency Department today have been rendered on an emergency basis only and are not intended to be a substitute for an effort to provide complete medical care. You should contact your follow-up physician as it is important that you let him or her check you and report any new or remaining problems since it is impossible to recognize and treat all elements of an injury or illness in a single emergency care center visit.

Care provided by: Hinchman, Brant, DO

Diagnosis: Abrasion, right knee; Abrasion of unspecified front wall of thorax

DISCHARGE INSTRUCTIONS	FORMS
VIS, Tetanus, Diphtheria (Td) - CDC Abrasion, Easy-to-Read Knee Pain, Easy-to-Read	Medication Reconciliation
FOLLOW UP INSTRUCTIONS	**PRESCRIPTIONS**
Private Physician When: Tomorrow; Reason: Further diagnostic work-up, Recheck today's complaints, Continuance of care **Emergency Department** When: As needed; Reason: Fever > 102 F, Trouble breathing, Worsening of condition	None
SPECIAL NOTES	
None	

National Hopeline Network: 1-800-784-2433

If you received a narcotic or sedative medication during your Emergency Department stay you should not drive, drink alcohol or operate heavy machinery for the next 8 hours as this medication can cause drowsiness, dizziness, and decrease your response time to events.

I hereby acknowledge that I have received a copy of my transition care record and understand the above instructions and prescriptions.

Brian D. Hill
Brian Hill

Jessica Tate, RN, BSN
ED Physician or Nurse
09/21/2018 04:52

EMERGENCY DEPARTMENT RECORD
Physician Documentation
Sovah Health Martinsville
Name: Brian Hill
Age: 28 yrs
Sex: Male
DOB: 05/26/1990
MRN: MM00370912
Arrival Date: 09/21/2018
Time: 04:04
Account#: MM7806761243
Bed ER 9
Private MD:
ED Physician Hinchman, Brant
HPI:
09/21
04:40 This 28 yrs old White Male presents to ER via Law Enforcement with complaints of Knee Pain. bdh
09/21
04:48 28-year-old male with diabetes and autism presents for evaluation after complaining of right knee pain and scrapes and abrasions. Patient was apparently taking pictures of himself in the nude across town this evening and when police attempted apprehend him brain through Briar patch. Patient does report scratches and abrasions to the right knee but no pain on range of motion. Unknown last tetanus.. bdh

Historical:
- Allergies: Ranitidine;
- PMHx: autism; Diabetes - IDDM; OCD;
- Exposure Risk/Travel Screening:: Patient has not been out of the country in last 30 days. Have you been in contact with anyone who is ill that has traveled outside of the country in the last 30 days? No.
- Social history:: Tobacco Status: The patient states he/she has never used tobacco. The patient/guardian denies using alcohol, street drugs, The patient's primary language is English. The patient's preferred language is English.
- Family history:: No immediate family members are acutely ill.
- Sepsis Screening:: Sepsis screening negative at this time.
- Suicide Risk Screen:: Have you been feeling depressed in the last couple of weeks? No Have you been feeling hopeless to the extent that you would want to end your life? No Have you attempted suicide or had a plan to attempt within the last 12 months? No.
- Abuse Screen:: Patient verbally denies physical, verbal and emotional abuse/neglect.
- Tuberculosis screening:: No symptoms or risk factors identified.
- The history from nurses notes was reviewed: and my personal history differs from that reported to nursing.

ROS:
09/21
04:49 All other systems are negative, except as documented below. bdh

Constitutional: Negative for chills, fever. Respiratory: Negative for

FOLLOW UP INSTRUCTIONS

Private Physician
When: Tomorrow
Reason: Further diagnostic work-up, Recheck today's complaints, Continuance of care

Emergency Department
When: As needed
Reason: Fever > 102 F, Trouble breathing, Worsening of condition

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MRN # MM00370912

X-RAYS and LAB TESTS:
If you had x-rays today they were read by the emergency physician. Your x-rays will also be read by a radiologist within 24 hours. If you had a culture done it will take 24 to 72 hours to get the results. If there is a change in the x-ray diagnosis or a positive culture, we will contact you. Please verify your current phone number prior to discharge at the check out desk.

MEDICATIONS:
If you received a prescription for medication(s) today, it is important that when you fill this you let the pharmacist know all the other medications that you are on and any allergies you might have. It is also important that you notify your follow-up physician of all your medications including the prescriptions you may receive today.

TESTS AND PROCEDURES

Labs
None

Rad
None

Procedures
None

Other
Call ERT, IV saline lock

Chart Copy

7806761234

cough, dyspnea on exertion, shortness of breath. MS/extremity: Positive for pain, Negative for decreased range of motion, paresthesias, swelling, tenderness, tingling. Skin: Positive for abrasion(s), Negative for rash, swelling.

Exam:
09/21
04:49 Constitutional: This is a well developed, well nourished patient who bdh is awake, alert, and in no acute distress. Head/Face: Normocephalic, atraumatic. Eyes: Pupils equal round and reactive to light, extra-ocular motions intact. Lids and lashes normal. Conjunctiva and sclera are non-icteric and not injected. Cornea within normal limits. Periorbital areas with no swelling, redness, or edema. ENT: Oropharynx with no redness, swelling, or masses, exudates, or evidence of obstruction, uvula midline. Mucous membranes moist. No meningismus. Neck: Supple, full range of motion without nuchal rigidity, or vertebral point tenderness. No Meningismus. No JVD Cardiovascular: Regular rate and rhythm with a normal S1 and S2. No gallops, murmurs, or rubs. No JVD. No pulse deficits. Respiratory: Lungs have equal breath sounds bilaterally, clear to auscultation and percussion. No rales, rhonchi or wheezes noted. No increased work of breathing, no retractions or nasal flaring. Abdomen/GI: Soft, non-tender, with normal bowel sounds. No distension or tympany. No guarding or rebound. No pulsatile mass. Back: No spinal tenderness. No costovertebral tenderness. Full range of motion. Skin: Multiple superficial abrasions to the groin and abdomen without fluctuance or tenderness. MS/ Extremity: Pulses equal, no cyanosis. Neurovascular intact. Full, normal range of motion. No peripheral edema, tenderness. Abrasion to right knee but nontender, no deformity or swelling. Ambulating without difficulty. Neuro: Awake and alert, GCS 15, oriented to person, place, time, and situation. Cranial nerves II-XII grossly intact. Psych: Awake, alert, with orientation to person, place and time. Behavior, mood, and affect are within normal limits.

Vital Signs:
09/21
04:09 BP 124 / 86; Pulse 119; Resp 19; Temp 98; Pulse Ox 98% ; Weight 99.79 jt kg; Height 6 ft. 0 in. (182.88 cm); Pain 0/10;
09/21
05:01 BP 119 / 80; Pulse 106; Resp 16; Temp 98.2; Pulse Ox 99% ; Pain 0/10; jt
09/21
04:09 Body Mass Index 29.84 (99.79 kg, 182.88 cm) jt

MDM:
09/21
04:04 MSE Initiated by Provider. bdh
09/21
04:50 Differential diagnosis: fracture, sprain, penetrating trauma, et al. bdh ED course: Cleared from a psychiatric standpoint by Behavioral Health. Patient will be discharged to jail. No new complaints.. Data reviewed: vital signs, nurses notes. Counseling: I had a detailed

discussion with the patient and/or guardian regarding: the historical points, exam findings, and any diagnostic results supporting the

discharge/admit diagnosis, the need for outpatient follow up, to return to the emergency department if symptoms worsen or persist or if there are any questions or concerns that arise at home.

09/21
04:16 Order name: Call ERT; Complete Time: 04:25 bdh
09/21
04:16 Order name: IV saline lock; Complete Time: 04:36 bdh
09/21
04:29 Order name: Other: NO suicidal homicidal risk; Complete Time: 05:03 bdh

Dispensed Medications:
Discontinued: NS 0.9% 1000 ml IV at 999 mL/hr once
09/21
04:36 Drug: Tetanus-Diphtheria Toxoid Adult 0.5 ml {Manufacturer: Grifols Therapeutics. Exp: 09/27/2020. Lot #: A112A. } Route: IM; Site: right deltoid; lbl
09/21
05:04 Follow up: Response: No adverse reaction lbl
09/21
04:36 Drug: NS 0.9% 1000 ml Route: IV; Rate: 999 mL/hr; Site: right arm; Delivery: Primary tubing; lbl
09/21
05:11 Follow up: IV Status: Completed infusion dr

Disposition:
09/21
04:52 Electronically signed by Hinchman, Brant, DO at 04:52 on 09/21/2018. bdh
Chart complete.

Disposition:
09/21/18 04:52 Discharged to Jail/Police. Impression: Abrasion, right knee, Abrasion of unspecified front wall of thorax.
- Condition is Stable.
- Discharge Instructions: VIS, Tetanus, Diphtheria (Td) - CDC, Abrasion, Easy-to-Read, Knee Pain, Easy-to-Read.

- Medication Reconciliation form.
- Follow up: Private Physician; When: Tomorrow; Reason: Further diagnostic work-up, Recheck today's complaints, Continuance of care. Follow up: Emergency Department; When: As needed; Reason: Fever > 102 F, Trouble breathing, Worsening of condition.
- Problem is new.
- Symptoms have improved.

Order Results:
There are currently no results for this order.
Signatures:

Dispatcher MedHost		EDMS
Tate, Jessica, RN	RN	jt
Hinchman, Brant, DO	DO	bdh

Ramey, Nicole nmr
Bouldin, Lauren, RN RN lb1
Reynolds, Daniel R RN dr

Corrections: (The following items were deleted from the chart)
09/21
04:48 09/21 04:16 COMPREHENSIVE METABOLIC PANEL+LAB ordered. EDMS EDMS
09/21
04:48 09/21 04:16 COMPLETE BLD COUNT W/AUTO DIFF+LAB ordered. EDMS EDMS
09/21
04:49 09/21 04:16 CPK, TOTAL+LAB ordered. EDMS EDMS
09/21
04:50 09/21 04:16 ALCOHOL, ETHYL+LAB ordered. EDMS EDMS
09/21
04:50 09/21 04:16 STAT OVERDOSE PANEL+LAB ordered. EDMS EDMS
09/21
04:52 09/21 04:52 09/21/2018 04:52 Discharged to Jail/Police. Impression: bdh
Abrasion, right knee; Abrasion of unspecified front wall of thorax.
Condition is Stable. Discharge Instructions: Medication
Reconciliation. Follow up: Private Physician; When: Tomorrow; Reason:
Further diagnostic work-up, Recheck today's complaints, Continuance
of care. Follow up: Emergency Department; When: As needed; Reason:
Fever > 102 F, Trouble breathing, Worsening of condition. Problem is
new. Symptoms have improved. bdh
09/21
04:54 09/21 04:16 URINALYSIS W/REFLEX TO CULTURE+LAB ordered. EDMS EDMS

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